

MACRA acronyms explained

To help clarify some of the terms surrounding Medicare Access and CHIP Reauthorization Act (MACRA), the AMA has compiled a list of acronyms. This list will be updated regularly.

A

ABC™ - Achievable Benchmark of Care

ACO - accountable care organization

AHRQ - Agency for HealthCare Research and Quality

APM - alternative payment model

APRN - advanced practice registered nurse

ASPE - HHS' Office of the Assistant Secretary for Planning and Evaluation

AUC - appropriate use criteria

B

BPCI - bundled payments for care improvement

C

CAH - critical access hospital

CAHPS - Consumer Assessment of Healthcare Providers and Systems

CBSA - non-core based statistical area

CDS - clinical decision support

CEHRT - certified EHR technology

CFR - Code of Federal Regulations

CHIP - Children's Health Insurance Program

CJR - comprehensive care for joint replacement

CMMI - Center for Medicare & Medicaid Innovation (CMS Innovation Center)

CMS - Centers for Medicare and Medicaid Services

COI - collection of information

CPIA - clinical practice improvement activity

CPOE - computerized provider order entry

CPR - customary, prevailing and reasonable

CPS - composite performance score

CPT - Current Procedural Terminology

CQM - clinical quality measure

CY - calendar year

D

DPP - diabetes prevention program

E

eCQM - Electronic Clinician Quality Measure

ED - Emergency Department

EHR - electronic health record

EP - eligible professional

ESRD - End-stage Renal Disease

F

FFS - fee for service

FQHC - federally qualified health center

FR - Federal Register

G

GAO - Government Accountability Office

GPCI - Geographic Practice Cost Index

H

HAC - hospital-acquired condition

HCAHPS - Hospice Consumer Assessment of Healthcare Providers and Systems

HHS - Department of Health & Human Services

HIE - Health Information Exchange

HIPAA - Health Insurance Portability and Accountability Act of 1996

HITECH - Health Information Technology for Economic and Clinical Health

HOPD - Hospital Outpatient Department

HPSA - health professional shortage area

HRSA - Health Resources and Services Administration

I

IHS - Indian Health Service

IPAB - Independent Payment Advisory Board

IT - information technology

L

LDO - large dialysis organization

M

MA - medical assistant

MAC - Medicare Administrative Contractor

MACRA - Medicare Access and CHIP Reauthorization Act of 2015

MedPAC - Medicare Payment Advisory Commission

MEI - Medicare Economic Index

MIPAA - Medicare Improvements for Patients and Providers Act of 2008

MIPS - Merit-based Incentive Payment System

MLR - minimum loss rate

MSPB - Medicare spending per beneficiary

MSR - minimum savings rate

MU - Meaningful Use

MUA - medically underserved area

N

NCQA - National Committee for Quality Assurance

NPI - National Provider Identifier

NQF - National Quality Forum

O

OCM - Oncology Care Model

OIG - Office of the Inspector General

ONC - Office of the National Coordinator for Health Information Technology

P

PCMH - patient-centered medical home

PCORI - Patient-centered Outcomes Research Institute

PECOS - Medicare Provider Enrollment, Chain and Ownership System

PFPs - physician-focused payment models

PFS - physician fee schedule

PHS - public health service

PPS - prospective payment system

PQRS - Physician Quality Reporting System

PTAC - Physician-focused Payment Model Technical Advisory Committee

Q

QCDR - qualified clinical data registry

QIO - quality improvement organization

QP - qualifying APM participant

QPP - Quality Payment Program

QRDA - quality reporting document architecture

QRUR - quality and resource use reports

R

RAC - recovery audit contractor

RBRVS - Resource-based Relative Value Scale

RFI - request for information

RHC - rural health clinic

RIA - regulatory impact analysis

RVU - relative value unit

S

SGR - sustainable growth rate

T

TCPI - Transforming Clinical Practice Initiative

TIN - tax identification number

V

VBM - value-based payment modifier

VPS - volume performance standard